

**Scituate Community Preservation Committee
Funding Request Form**

DATE and YEAR of Application: 9-29-15

APPLICANT INFORMATION

Project Sponsor or Organization: First Baptist Church of Scituate
Contact Name & Address: Pastor Leo Christian, 656 Country Way, Scituate
or Cynde Robbins, 292 Clapp Rd, Scituate
Telephone Number: church 781-545-0058 Email: Cynde, Robbins @Comcast.net
Cynde 781-545-4167

PROJECT INFORMATION

CPA CATEGORY (check all that apply):

☐ OPEN SPACE

☐ RECREATION

☒ HISTORIC PRESERVATION

☐ COMMUNITY HOUSING

NAME OF PROJECT: First Baptist Church Assessment & Restoration

BRIEF DESCRIPTION OF PROJECT: We are asking for funding for a building
condition assessment and funds to start some of the
restoration work.

Attach additional pages including summary, budget, estimated timeline and justification of need.

Project Location or Address: 656-660 Country Way
Include map, photo and other imagery for ALL category projects.

If Open Space or Community Housing:

Assessor's Map Page, Block & Lot Number: 20-4-16

Number of acres in parcel: 2.5 acres

Current Zoning Classification: Residential

Assessed Value: \$1,393,000. for land, church and parsonage

Title in name of: First Baptist Church Title Abstract Date: _____

Number of housing units proposed: _____

Summarize how this request benefits the Town of Scituate and meets the goals of the Community Preservation Act.

This project meets all the goals of CPC under
Historic Preservation.

PERMITS AND APPROVALS

What permits and approvals are required? Have they been obtained or have you filed for them?

Name of Permit	Filed? (Y/N)	Filed (Date)	Obtained (Date)
Eventually Building permits will be sought			

Have you met with any other Town Boards or committees? If so, what were the outcomes of those meetings? (Letters of support from other Boards and committees should be included in the application or supplied at a later date.)

We will be meeting with the Scituate Historical
Commission in October.

Notes: _____

What non-financial support and services are necessary, and how will these be provided?

FUNDING

Describe the proposed funding for this project. Identify other sources you are seeking funds from, and whether those funds are secured. Identify any funds you or your organizations are willing to provide.

CPC funds now. We intend to apply for grants
from other foundations after the assessment is completed

Proposed Funding

Total Project Cost	CPC Funds Requested	Sources of Funds other than CPA	Amount	Funding Secured? (Y/N)*
\$ 54,000	\$ 54,000.		\$	
			\$	
			\$	
			\$	
			\$	

* If the request is still outstanding, when do you expect to hear a decision?

OTHER COMMENTS

Provide any other information you think the CPC should be aware of in evaluating your request for funding.

Please see attached narrative and exhibits

By signing below, the Applicant represents he/she is duly authorized, agrees to the terms and conditions and all other requirements of this Application and agrees to be bound thereby if funding is granted for the Project.

Date: 9-29-15 Signature: Leo D Christian Pastor

FOR COMMUNITY PRESERVATION COMMITTEE USE

This request received by Scituate CPC on _____

Copies provided to CPC Members on _____

Additional information required: _____

Committee Vote

Votes:	Yes / No	Votes: Y/N/Abstain	Date
Recommend to Town Meeting			

Other: _____